Case 16-18469-VFP Doc 44 Filed 09/19/18 Entered 09/19/18 14:39:07 Desc Main

		DOGDINEDI	Paue Lui
Fill in this info	ormation to identify your	case:	
Debtor 1	Norbey M Pareja		
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse if, filing)	First Name	Middle Name	Last Name
United States B	Bankruptcy Court for the:	DISTRICT OF NEW JERSEY	
Case number	16-18469		
(if known)			

■ Check if this is an amended filing

## Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	376,500.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	115,249.37
	1c. Copy line 63, Total of all property on Schedule A/B	\$	491,749.37
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	480,842.71
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	42,339.75
	Your total liabilities	\$	523,182.46
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	6,516.90
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	5,923.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your	ır other sc	hedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this	box and s	submit this form to

the court with your other schedules.

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Debtor 1 Norbey M Pareja

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From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

10,750.00

\$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	3,254.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	3,254.00

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EIII	in this information to	a identify your c	360.								
	btor 1	Norbey M Pa									
	btor 2 buse, if filing)		•			_					
Uni	ited States Bankrupt	cy Court for the	: DISTRICT OF NEW J	ERSEY		_					
Cas	se number 16-	18469					Ch	eck if this is	:		
(If kr	nown)			-				An amende	ed filina		
										ng postpetition ollowing date:	
0	fficial Form	<u> 1061</u>						MM / DD/ Y	YYYY		
S	chedule I: `	Your Inc	ome								12/15
spo atta	use. If you are separate sheet	arated and you et to this form.	are married and not fili r spouse is not filing wi On the top of any additi	ith you, do not inclu	ıde infori	matio	n abo	ut your sp	ouse. If m	ore space is	needed,
1.	Fill in your emplo information.	oyment		Debtor 1				Debtor 2	2 or non-fi	iling spouse	
	If you have more t		Employment status	■ Employed			☐ Empl	oyed			
attach a separate information abou			Employment status	☐ Not employed			☐ Not e	employed			
	employers.		Occupation	Dental Hygenis	t						
	Include part-time, self-employed wor		Employer's name	Morris Plains D	ental						
	Occupation may ir or homemaker, if i		Employer's address	559 Speedwell Morris Plains, N		0					
			How long employed to	here? 16 year	rs						
Pai	rt 2: Give Det	ails About Mor	nthly Income								
	imate monthly inco		ate you file this form. If	you have nothing to r	eport for	any lii	ne, wr	ite \$0 in the	space. Inc	clude your no	n-filing
-	ou or your non-filing s e space, attach a se	•	ore than one employer, co	ombine the informatio	n for all e	emplo	yers fo	or that perso	on on the li	ines below. If	you need
							For D	ebtor 1		btor 2 or ing spouse	
2.			ry, and commissions (becalculate what the monthle		2.	\$_		7,751.25	\$	N/A	
3.	Estimate and list	monthly overt	ime pay.		3.	+\$_		0.00	+\$	N/A	
4.	Calculate gross I	ncome. Add lir	ne 2 + line 3.		4.	\$	7,	751.25	\$	N/A	

4. \$ **7,751.25** 

N/A

Deb	tor 1	Norbey M Pareja			Case	number ( <i>if kn</i>	own)	16-18	3469	
					For	Debtor 1			Debtor 2 or -filing spouse	
	Copy	y line 4 here		4.	\$	7,751	.25	\$	N/A	<u>\</u>
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Secur	ity deductions	5a.	\$	1,524	.38	\$	N/A	<u>\</u>
	5b.	Mandatory contributions for reti	-	5b.	\$		.00	\$	N/A	_
	5c.	Voluntary contributions for retire		5c.	\$_	387		\$_	N/A	_
	5d. 5e.	Required repayments of retirements o	ent rund loans	5d. 5e.	\$_ \$		.00	\$ \$	N/A N/A	
	5f.	Domestic support obligations		5f.	\$_		.00	\$	N/A	
	5g.	Union dues		5g.	\$		.00	\$	N/A	
	5h.	Other deductions. Specify:		5h	+ \$_	0	.00	+ \$	N/A	<u>\</u>
6.	Add	the payroll deductions. Add lines	5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,911	.93	\$	N/A	<u>\</u>
7.	Calc	ulate total monthly take-home pay	Subtract line 6 from line 4.	7.	\$	5,839	.32	\$	N/A	<u>\</u>
8.	List a 8a.	all other income regularly received. Net income from rental property profession, or farm.  Attach a statement for each proper receipts, ordinary and necessary be monthly net income.	and from operating a business, ty and business showing gross	8a.	\$	0	.00	\$	N/A	
	8b.	Interest and dividends		8b.	\$-		.00	\$ -	N/A	
	8c.	regularly receive	ou, a non-filing spouse, or a depend child support, maintenance, divorce it.	ent 8c.	\$		.00	\$	N/A	_
	8d.	Unemployment compensation		8d.	\$_		.00	\$	N/A	
	8e.	Social Security		8e.	\$		.00	\$	N/A	\
	8f.		alue (if known) of any non-cash assistanps (benefits under the Supplemental	ince 8f.	\$	O	.00	\$	N/A	1
	8g.	Pension or retirement income		8g.	\$	0	.00	\$	N/A	<u> </u>
	8h.	Other monthly income. Specify:	Average net income from Huds Dental	s <b>on</b> 8h	+ \$_	677	.58	+ \$	N/A	<u>\</u>
9.	Add	all other income. Add lines 8a+8b-	+8c+8d+8e+8f+8g+8h.	9.	\$	677	.58	\$	N/	Α
10.	Calc	ulate monthly income. Add line 7	+ line 9	10. \$	: 1	6.516.90	+ \$		N/A = \$	6.516.90
		the entries in line 10 for Debtor 1 and				0,010.00	.  _		- TVA	0,010.00
11.	Inclu- other	de contributions from an unmarried   r friends or relatives. ot include any amounts already inclu	the expenses that you list in Sched partner, members of your household, y uded in lines 2-10 or amounts that are	our deper					Schedule J.	0.00
12.		e that amount on the Summary of Sc	ine 10 to the amount in line 11. The hedules and Statistical Summary of Ce						12. \$	6,516.90
	_			_						ly income
13.	Do y ■ □	No. Yes. Explain:	e within the year after you file this fo	orm?						

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Fill	in this informa	tion to identify yo	ur case:							
	otor 1	Norbey M Pa				Ch		this is:		
	otor 2 ouse, if filing)						As		wing postpetition chapter the following date:	
Unit	ed States Bankr	ruptcy Court for the:	DISTRI	CT OF NEW JERSEY			MM	I / DD / YYYY		
	e number 16	6-18469								
Of	fficial Fo	rm 106J				l				
Be info nur	as complete a ormation. If m mber (if know	ore space is neen n). Answer ever	possible. eded, atta y question	If two married people a						15
Par 1.	t 1: Descr Is this a joir	ibe Your House nt case?	hold							_
	■ No. Go to	line 2. s Debtor 2 live i	n a separ	ate household?						
	□ N □ Y	_	t file Offici	al Form 106J-2, <i>Expense</i>	es for Separate House	ehold of De	ebtor 2	2.		
2.	Do you have	e dependents?	□ No							
	Do not list Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relati			Dependent's age	Does dependent live with you?	
	Do not state dependents				Son			16	□ No ■ Yes □ No □ Yes □ No □ Yes □ No □ Yes □ No	
3.	expenses of yourself and	penses include f people other the d your depender	nan nts?	No Yes					☐ Yes	
exp	imate your ex		our bankrı	y Expenses uptcy filing date unless y is filed. If this is a sup						;
the		n assistance and		government assistance luded it on <i>Schedule I:</i>				Your exp	enses	
4.		or home ownersl and any rent for the		ses for your residence. r lot.	Include first mortgage	e 4.	\$_		2,265.00	
	If not includ	led in line 4:								
	4a. Real e	estate taxes				4a.			0.00	
	•	rty, homeowner's				4b.			0.00	
		maintenance, re owner's associati	•	ıpkeep expenses dominium dues		4c. 4d.	· : —		0.00	
5.				our residence, such as h	ome equity loans	5.			0.00	

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Debtor 1 No	rbey M Pareja	Case number (if known	16-18469
-			
6. <b>Utilities:</b> 6a. Ele	ctricity, heat, natural gas	6a. \$	250.00
	· · · · · · · · · · · · · · · · · · ·	6b. \$	
	tter, sewer, garbage collection	·	100.00
	ephone, cell phone, Internet, satellite, and cable services	6c. \$	500.00
	ner. Specify:	6d. \$	0.00
	d housekeeping supplies	7. \$	800.00
	e and children's education costs	8. \$	300.00
_	, laundry, and dry cleaning	9. \$	85.00
	care products and services	10. \$	140.00
	and dental expenses	11. \$	150.00
•	rtation. Include gas, maintenance, bus or train fare. clude car payments.	12. \$	140.00
	iment, clubs, recreation, newspapers, magazines, and books	13. \$	300.00
	le contributions and religious donations	14. \$	50.00
5. Insuranc	•	14. φ	50.00
	clude insurance deducted from your pay or included in lines 4 or 20.		
	e insurance	15a. \$	0.00
	alth insurance	15b. \$	0.00
	hicle insurance	15b. \$	230.00
		·	
	ner insurance. Specify:	15d. \$	0.00
Specify:	o not include taxes deducted from your pay or included in lines 4 or 20.	16. \$	0.00
	ent or lease payments:	170 °	040.00
	r payments for Vehicle 1	17a. \$	613.00
	r payments for Vehicle 2	17b. \$	0.00
	ner. Specify:	17c. \$	0.00
	ner. Specify:	17d. \$	0.00
	ments of alimony, maintenance, and support that you did not report as I from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).		0.00
	yments you make to support others who do not live with you.	\$	0.00
Specify:	yments you make to support others who do not live with you.	19. Ψ ———	0.00
	al property expenses not included in lines 4 or 5 of this form or on Sch		•
	rtgages on other property	20a. \$	0.00
	al estate taxes	20b. \$	0.00
	operty, homeowner's, or renter's insurance	20c. \$	0.00
	intenance, repair, and upkeep expenses	20d. \$	-
	meowner's association or condominium dues	20d. \$	0.00
		· .	0.00
1. Other: Sp	Decity:	21. +\$	0.00
2. Calculate	e your monthly expenses		
22a. Add	lines 4 through 21.	\$	5,923.00
22b. Cop	y line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$	,
	line 22a and 22b. The result is your monthly expenses.	\$	5,923.00
			0,320.00
	e your monthly net income.		_
	py line 12 (your combined monthly income) from Schedule I.	23a. \$	6,516.90
23b. Co	py your monthly expenses from line 22c above.	23b\$	5,923.00
	otract your monthly expenses from your monthly income.	00 - 6	E02.00
The	e result is your monthly net income.	23c.   \$	593.90
	xpect an increase or decrease in your expenses within the year after y		
	le, do you expect to finish paying for your car loan within the year or do you expect you n to the terms of your mortgage?	ur mortgage payment to ir	ncrease or decrease because of a
■ No.			
☐ Yes.	Explain here:		

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Fill in this information to identify your case:				
Debtor 1	Norbey M Pareja			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		DISTRICT OF NEW JER	SEY	
Case number	16-18469			
(if known)				

if this is an ded filing

### Official Form 106Dec

## **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is l	T an attorney to help you fill out bankruptcy forms?
■ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119)
Under penalty of perjury, I declare that I have r that they are true and correct.	d the summary and schedules filed with this declaration and
X /s/ Norbey M Pareja	x
Norbey M Pareja Signature of Debtor 1	Signature of Debtor 2
Date September 19, 2018	Date

Official Form 106Dec